



PATENT  
Attorney Docket No. 101.0050-00000  
Customer No. 22882  
Express Mail Label No. ET747368018US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: )  
)  
Gary K. Michelson, M.D. )  
)  
Serial No.: 08/484,928 ) Group Art Unit: 3731  
)  
Filed: June 7, 1995 ) Examiner: D. Reip  
)  
For: FRUSTO-CONICAL INTERBODY )  
SPINAL FUSION IMPLANT )

Assistant Commissioner for Patents  
Washington, D.C. 20231

**RECEIVED**  
OCT 31 2002  
TECHNOLOGY CENTER R3700

Sir:

**SUBMISSION OF FORMAL DRAWINGS**

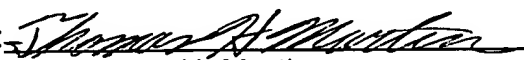
In reply to the Examiner's approval in the Office Action dated April 23, 2002, please replace the informal drawings with the 5 sheets of corrected formal drawings filed herewith (Fig. 1-12). If the formal drawings for any reason are not in full compliance with the pertinent statutes and regulations, please so advise the undersigned.

If any fees are necessary for the submission of these formal drawings, please charge our Deposit Account No. 50-1066.

Respectfully submitted,

MARTIN & FERRARO, LLP

Dated: October 23, 2002

By:   
Thomas H. Martin  
Registration No. 34,383

14500 Avion Parkway, Suite 300  
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**REQUEST FOR APPROVAL OF DRAWING CHANGE**


Subject to the approval of the Examiner, it is respectfully requested that Figs. 3A in the above-captioned application be amended by adding reference number 222' for consistency with the description. The change is indicated in red on the attached copy of the drawing.

Upon approval of the proposed change, Applicant respectfully requests that the submission of revised drawing be deferred until after a Notice of Allowance has issued.

Respectfully submitted,

MARTIN & FERRARO, LLP

Date: October 23, 2002

By:   
Thomas H. Martin  
Registration No. 34,383  
Attorney for Applicant

14500 Avion Parkway, Suite 300  
Chantilly, VA 20151-1101  
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10-29-02

GAU 3731

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Art Unit: 3731

Examiner: D. Reip

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Dear Sir:

**CERTIFICATE OF MAILING VIA U.S. EXPRESS MAIL**

Express Mail Mailing Label No. ET747368018US  
Date of Deposit October 23, 2002

I hereby certify that:

1. Amendment Transmittal (in duplicate; \$920 three-month extension fee and \$84 additional claims fee charged to Deposit Account No. 50-1066)
2. Amendment with attachment
3. Submission of Formal Drawings with 5 sheets of formal drawings (A4 paper; Figs. 1-12)
4. Request for Approval of Drawing Change with 1 sheet of red-lined drawings
5. Self-addressed stamped return postcard receipt

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service with sufficient postage under 37 C.F.R. § 1.10 on the date indicated above and are addressed to:

Assistant Commissioner for Patents  
Washington, D.C. 20231

Date: October 23, 2002

Sandra L. Blackmon

14500 Avion Parkway, Suite 300  
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Telephone: 703-679-9300  
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Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is a Reply to the Final Office Action dated April 23, 2002, in the above-identified application.

- ☐ No additional fee is required.
- ☒ Applicant hereby requests a three-month extension of time to respond to the above office action.
- ☐ Submission of Formal Drawings with 5 sheets formal drawings (A4 paper; Figs. 1-12) is enclosed.
- ☐ Request for Approval of Drawing Change with 1 sheet of drawings showing changes in red is enclosed.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	163	-	171 **	0	LG=\$18 SM=\$9	\$ 0
INDEPENDENT CLAIMS FEE	10	-	9 ***	1	LG=\$84 SM=\$42	\$ 84.00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140	\$ 0
TOTAL						\$ 84.00

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.


\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ A fee in the amount of \$ 84.00 to cover the additional claims fee is to be charged to Deposit Account No. 50-1066.
- ☒ A fee in the amount of \$ 920.00 to cover the three-month extension of time fee is to be charged to Deposit Account No. 50-1066.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1066. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

MARTIN & FERRARO, LLP

Date: October 23, 2002

By:   
Thomas H. Martin  
Registration No. 34,383  
Attorney for Applicant

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